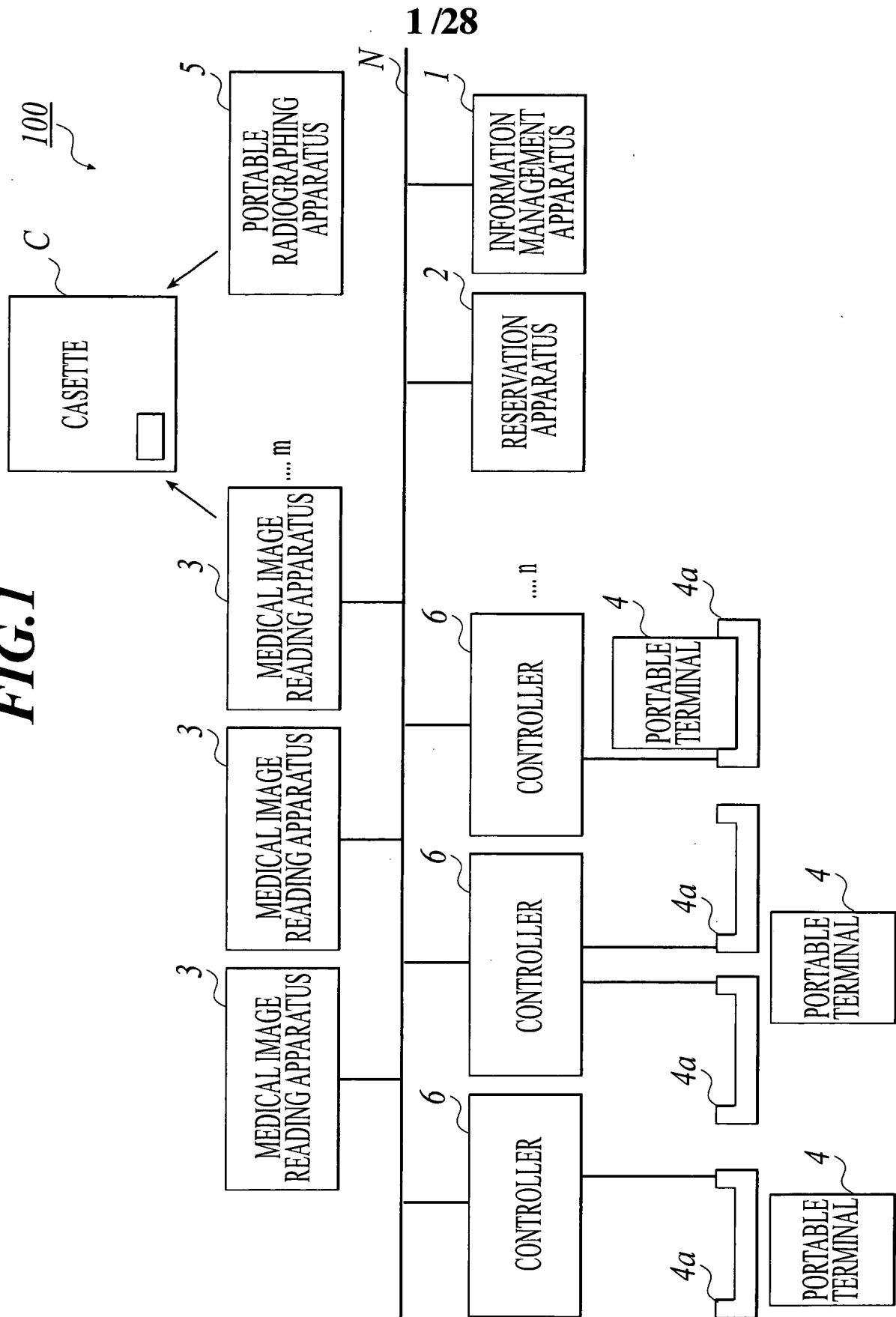
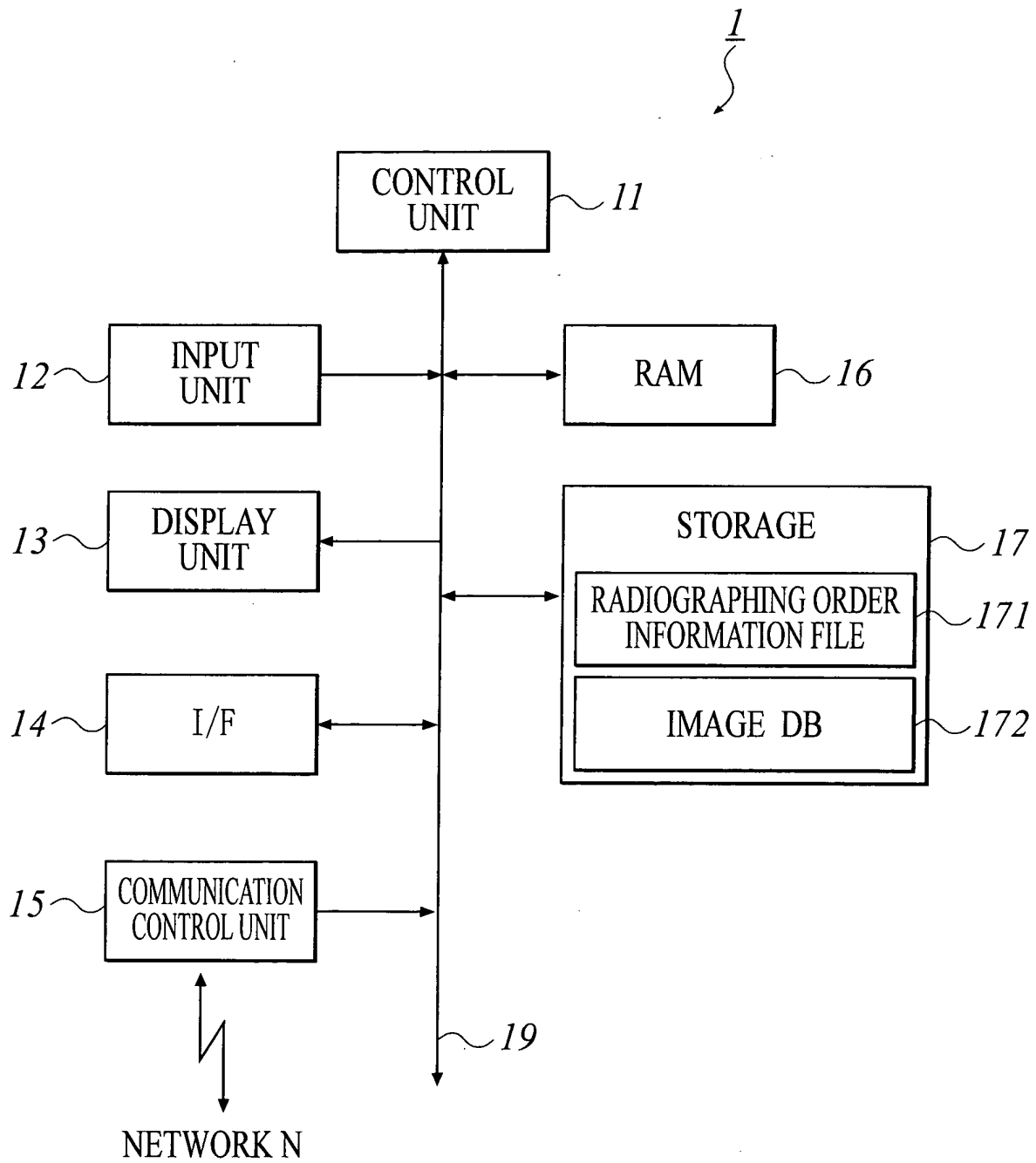


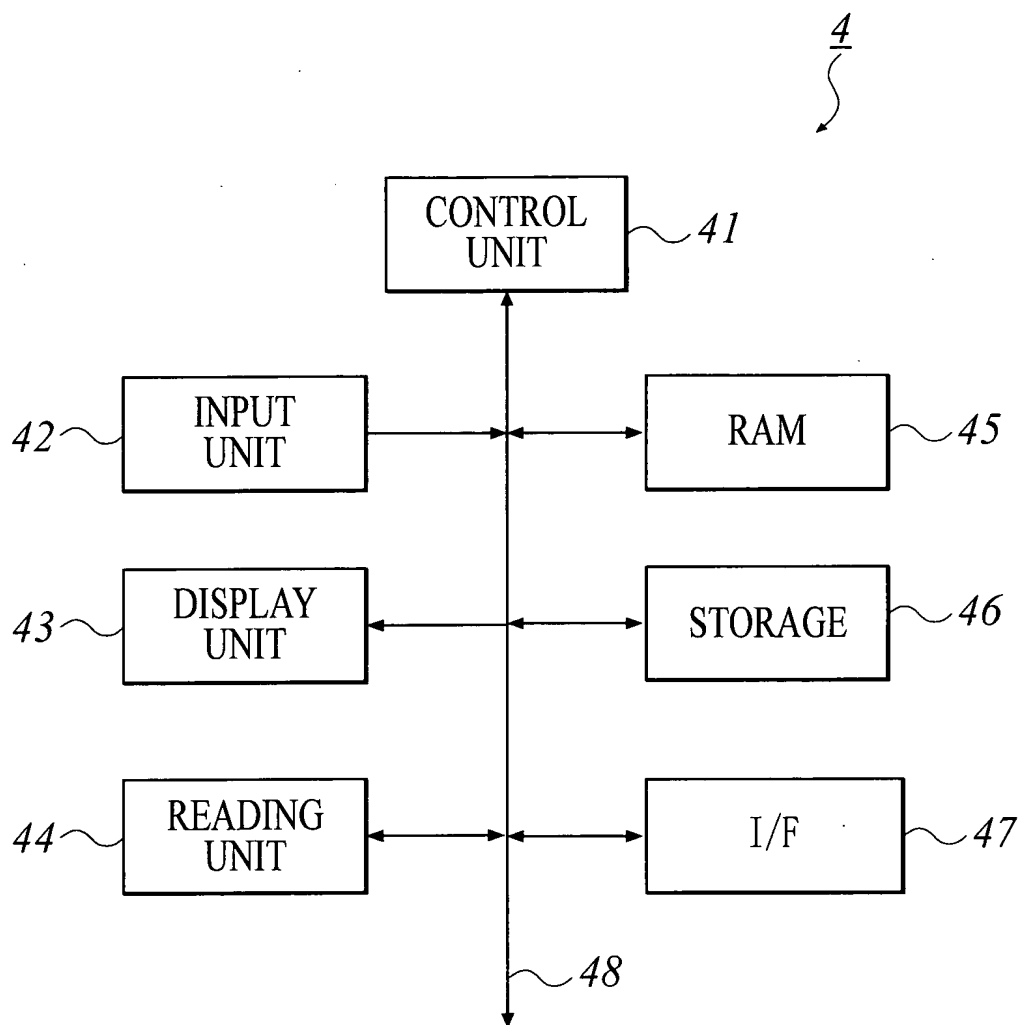
**FIG. 1**



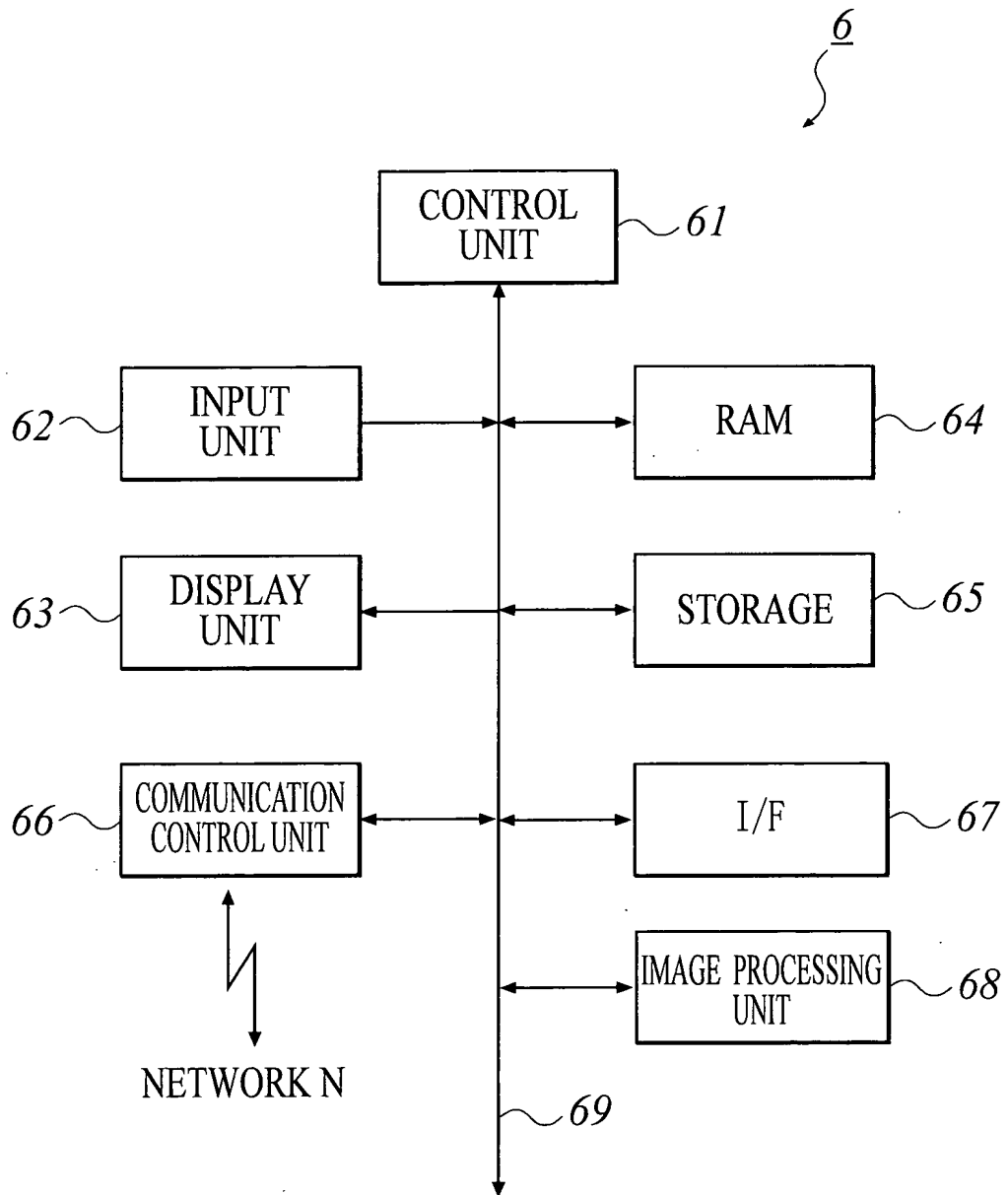
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**FIG. 2**



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**FIG. 3**

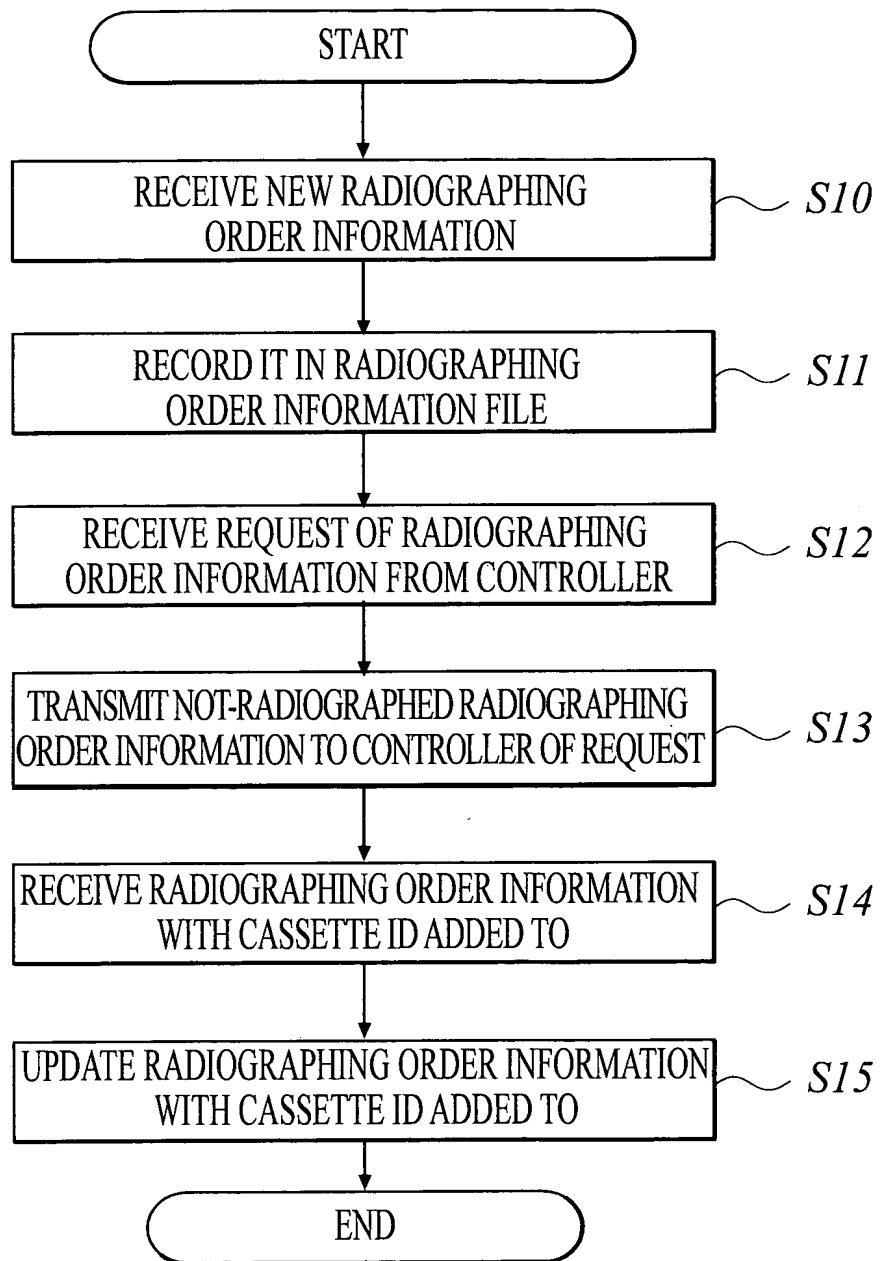


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**FIG. 4**

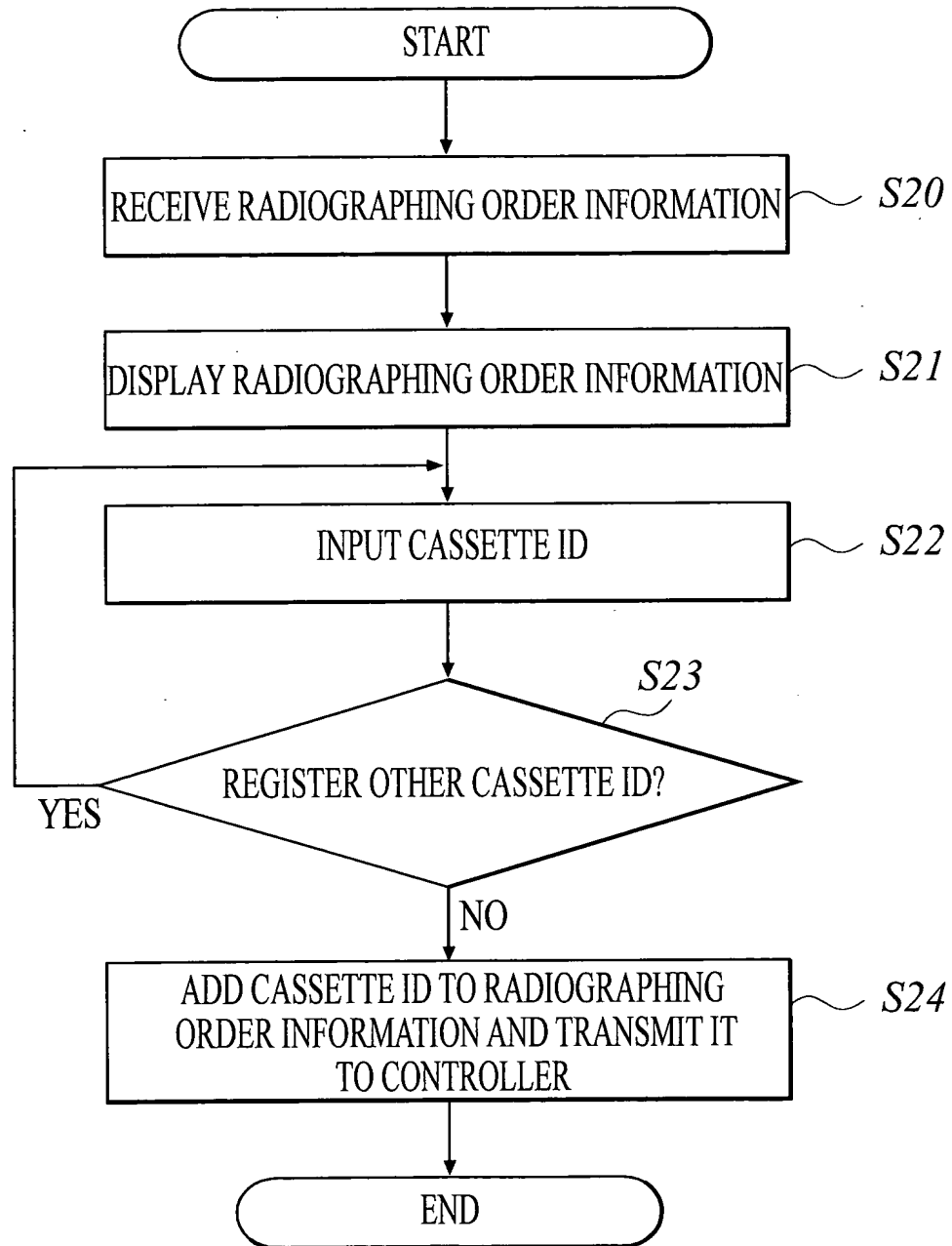


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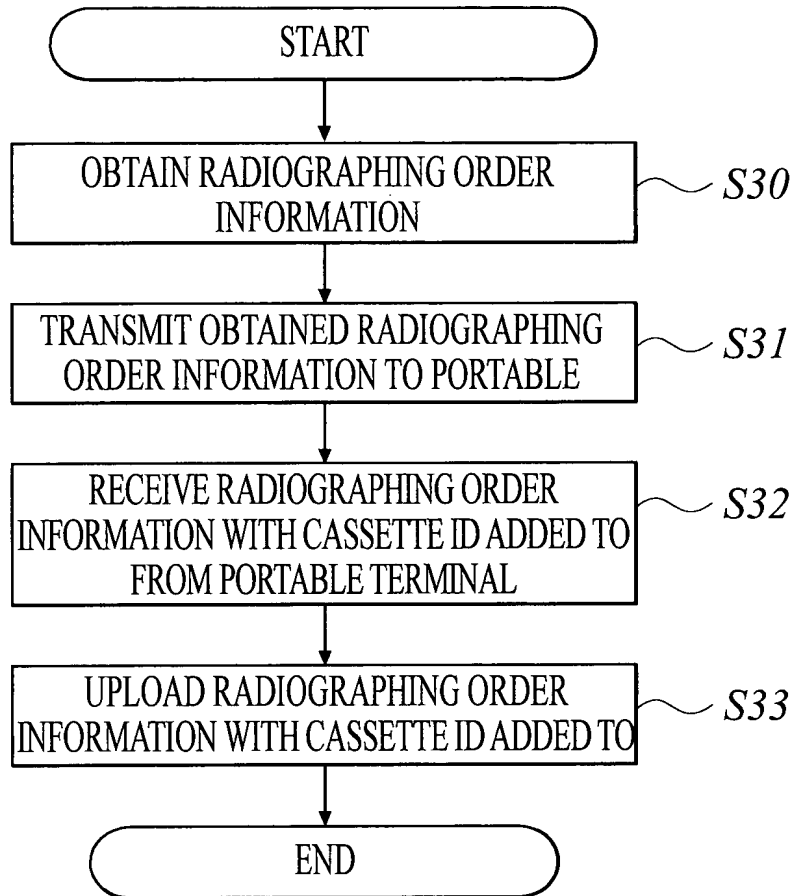
**FIG. 5**



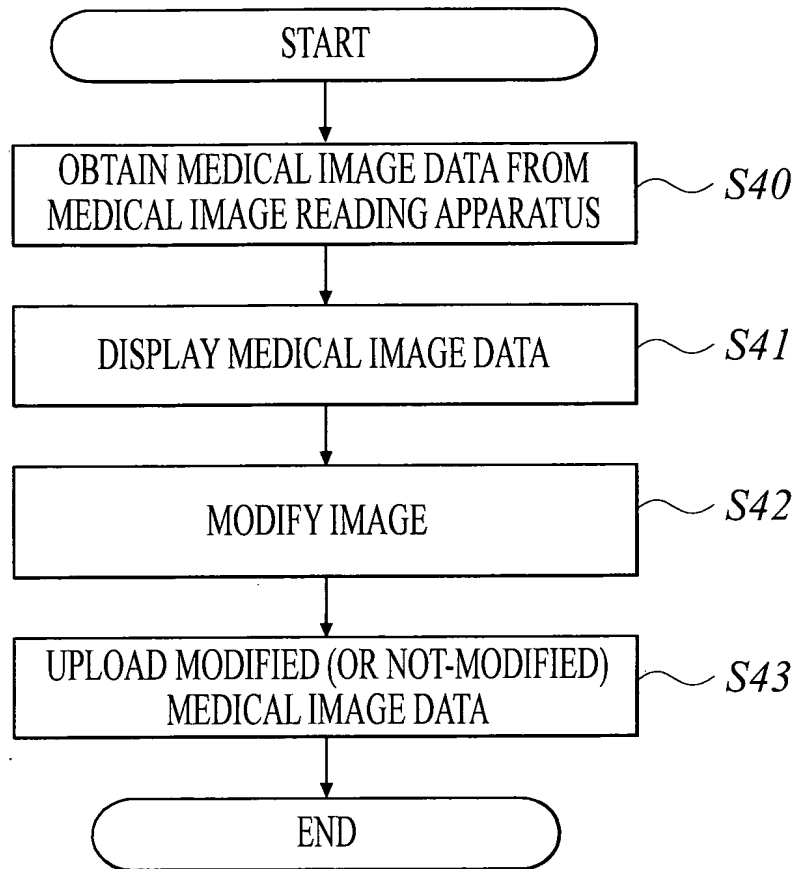
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**FIG. 6**



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**FIG 7**



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**FIG 8**



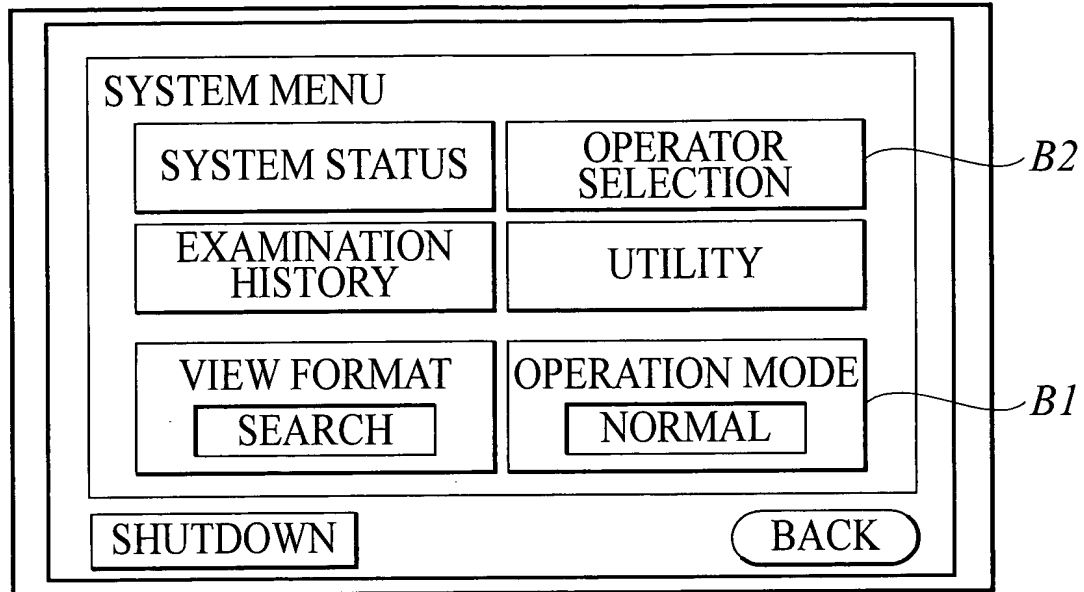




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**FIG 10A**

631



**FIG 10B**

632

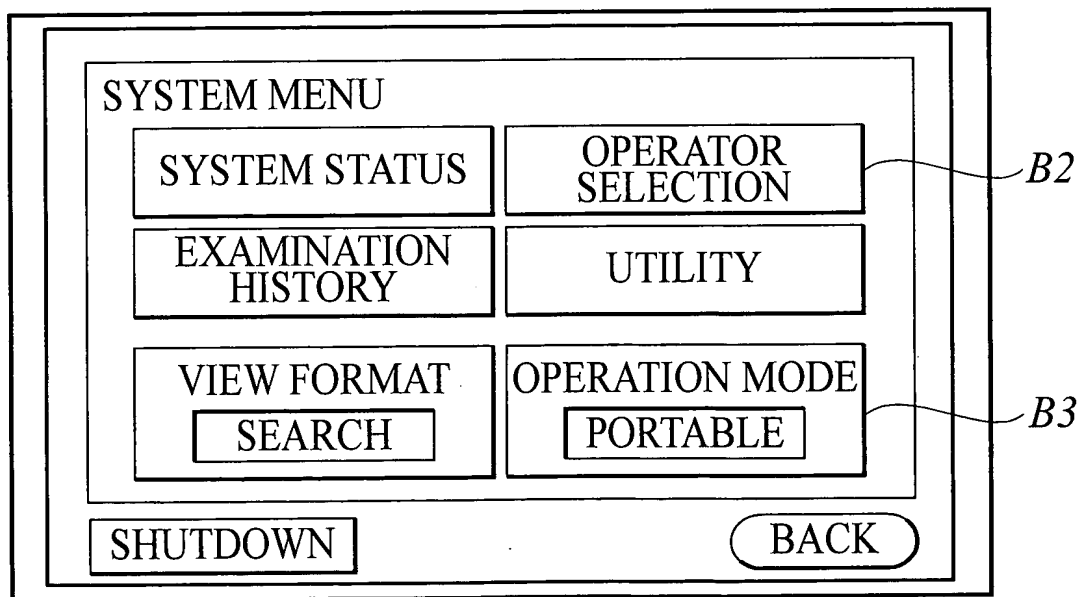


FIG.11

633

OPERATOR :

PATIENT ID

01212

PATIENT NAME  
ROMAN ALPHABET

SAKURA TAROU

PATIENT NAME KANA

サクラ タロウ

PATIENT NAME  
CHINESE CHARACTER

桜 太郎

SEX

MALE

BIRTH DATE  
(AGE)

1993-04-23  
0CLOCK MINUTE SECOND  
(10 YEARS 10 MONTHS OLD)

BIRTH DATE  
(WITHOUT CLOCK)

1993-04-23  
(10 YEARS 10 MONTHS OLD)

PATIENT  
COMMENTS

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▲

▼

SEARCH

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keyboard

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Caps Lock

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CLEAR

CANCEL

OK

B6

B5

B4

B7

B8

B12

FAVORITE		350		550		170	
HEAD	NECK	CHEST	ABDOMEN	SPINE	THORAX		
UPE	LOE	INFANT	MAMMO	SPECIAL	TEST		
ERECT CHEST	A-P	P-A	LAT				
SUPINE CHEST	A-P	LAT	DECUBITUS				
CHEST ETC	OBLIQUE	APICAL	EXPIRATION	PNEUMOTHORAX			
INFANT CHEST	A-P	P-A	LAT	OBLIQUE			
INFANT CHEST AND ABDOMEN	A-P	P-A	LAT				
FOLLOW-UP	P-A	INFANT P-A					

CANCEL

OK

<<

>>

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SCHEDULE

# FIG.13A

635

OPERATOR:TARO SUZUKI

FILTER

SCHEDULE 2

ITEM 0

SUSPEND 0

ITEM

PATIENT ID	TRANSMISSION TAB	PATIENT NAME	SEX	BIRTH DATE	RADIOGRAPHING CONDITION	RADIOGRAPHING COUNT	SUSPEND
03434		ICHIRO YAMADA	MALE	/ /	SKULL-AP	0/2	SUSPENDED
01212		TARO SAKURA	MALE	/ /	INFANT CHEST-AP	0/2	SUSPENDED

△

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SELECT ALL

TRANSMIT

RECEIVE

NEW/SEARCH

MODIFY

DELETE

SET CONDITION

SELECTING CONDITION

REFRESH

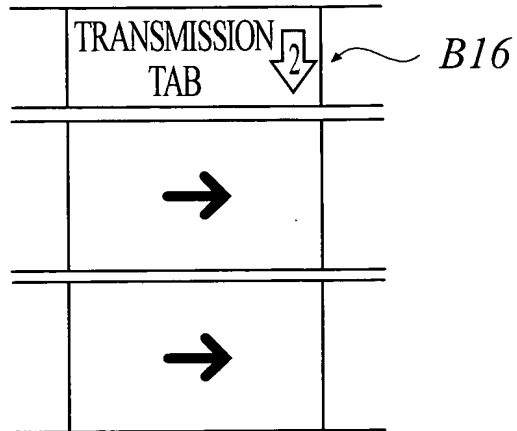
CONFIRMATION SCREEN

B15

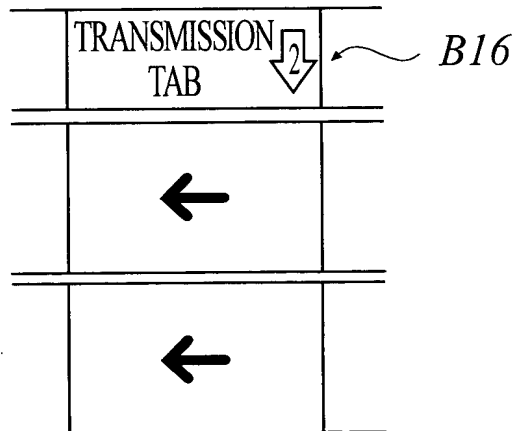
B16

B17

**FIG. 13B**



**FIG. 13C**



B18

FAVORITE		P 350		M 550		B 170	
HEAD	NECK	CHEST	ABDOMEN	SPINE	THORAX		
UPE	LOE	INFANT	MAMMO	SPECIAL	TEST		
ERECT CHEST	A → P	P → A	LAT				
SUPINE CHEST	A → P	LAT	DECUBITUS				
CHEST ETC	OBLIQUE	APICAL	EXPIRATION	PNEUMOTHORAX			
INFANT CHEST	A → P	P → A	LAT	OBLIQUE			
INFANT CHEST AND ABDOMEN	A → P	P → A	LAT				
FOLLOW-UP	P → A	INFANT P → A					

CHEST ETC OBLIQUE

CHEST ETC APICAL

△

△

▽

▽

CANCEL

OK

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SCHEDULE

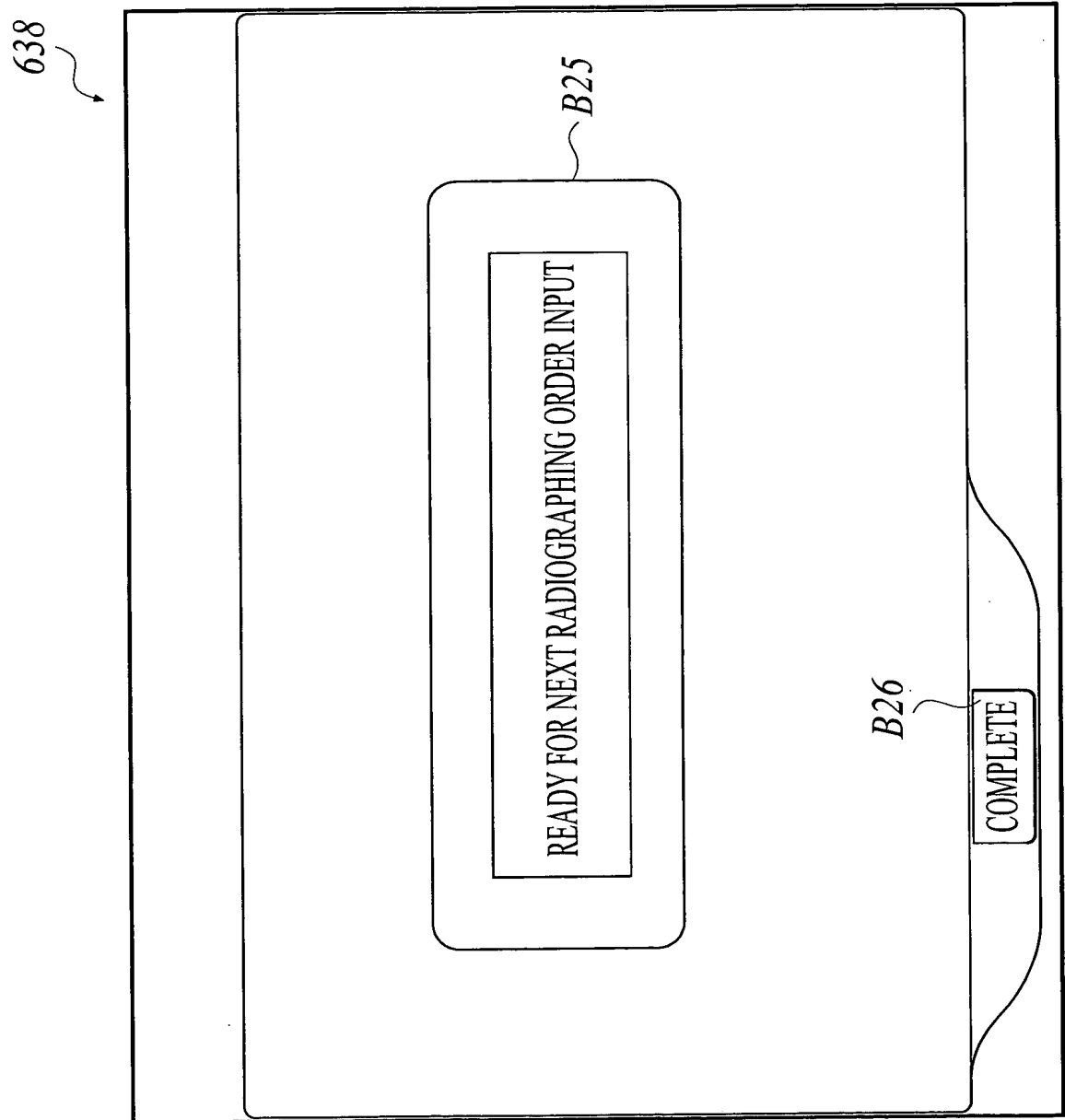
B19

B20





**FIG.16**



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OPERATOR : TARO SUZUKI			
<div> <div>MODIFY CONDITION</div> <div>MODIFY PATIENT</div> </div>	<div> <div>PATIENT ID 12345</div> <div>PATIENT NAME TARO SAKURA</div> </div>	<div> <div>PATIENT ID 12345</div> <div>PATIENT NAME TARO SAKURA</div> </div>	<div> <div>PATIENT ID 12345</div> <div>PATIENT NAME TARO SAKURA</div> </div>
B27	B28	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>
			<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>
			<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>
B29	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>
		<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	
		<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	
B30	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>
		<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	
		<div> <div>170</div> <div>RESOLUTION: NORMAL</div> </div>	

COMPLETE

SUSPEND

OK

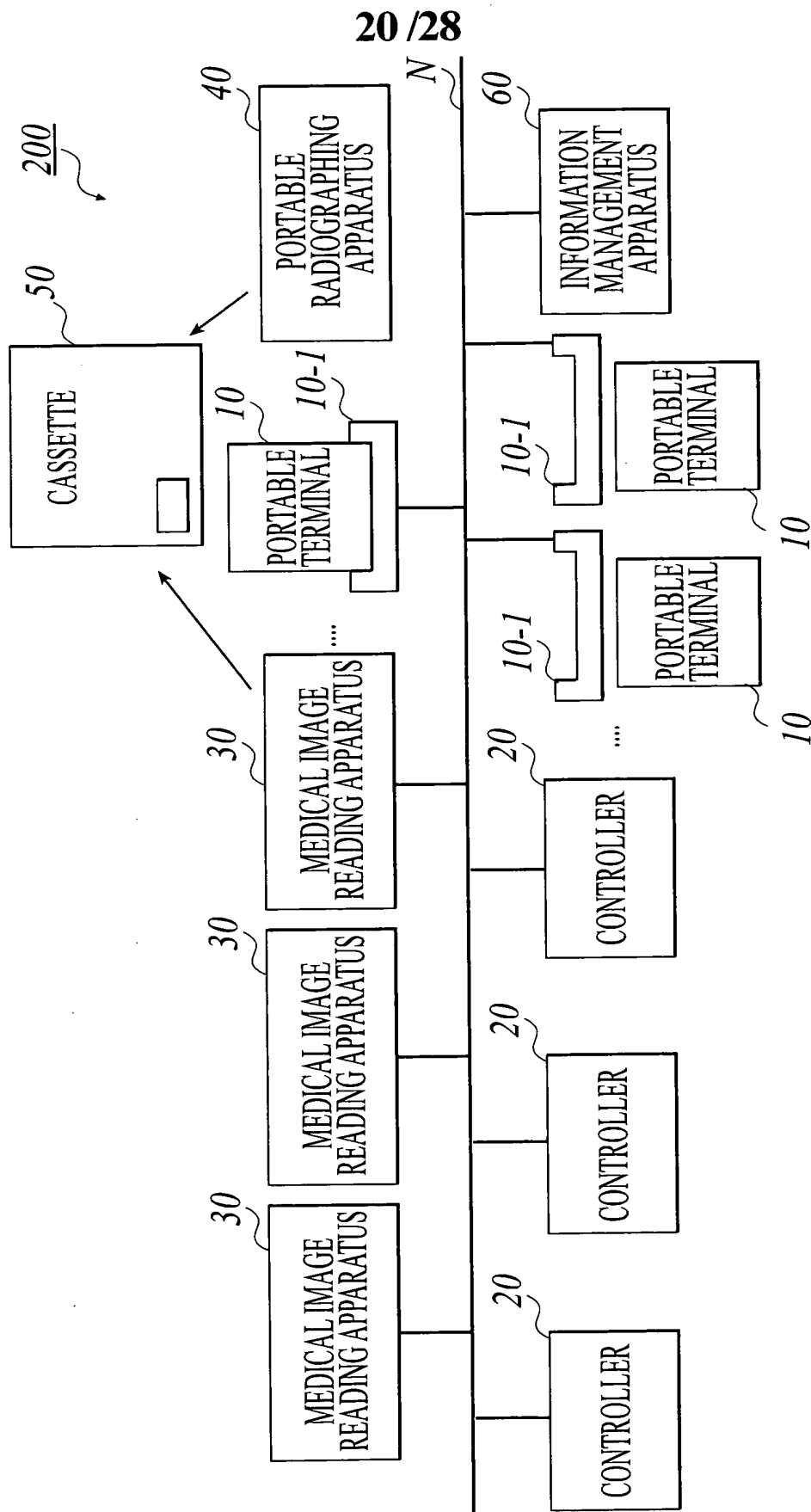
NG

# FIG.18

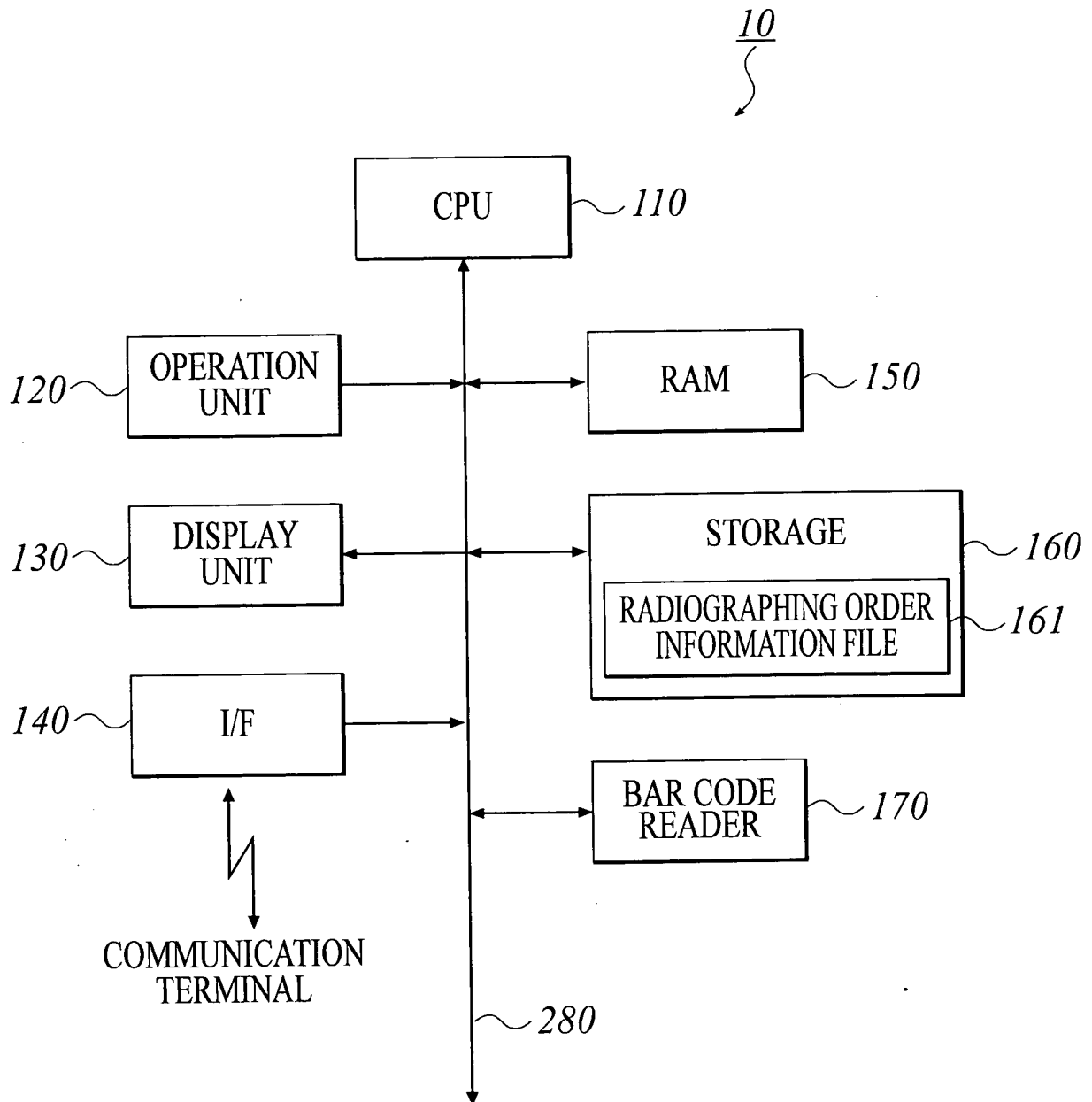
640

OPERATOR : TARO SUZUKI			MODIFY PATIENT		
PATIENT ID 12345 PATIENT NAME TARO SAKURA					
SEX MALE	DATE OF BIRTH	YEAR MONTH DAY ( YEARS) MONTH(S) OLD			
<div> <input type="checkbox"/> 350           <input type="checkbox"/> 550           <input type="checkbox"/> 170         </div>			MODIFY CONDITION		
170	RESOLUTION: NORMAL	ORDER=1 SERIES=1 IMAGE=1	170	RESOLUTION: NORMAL	ORDER=2 SERIES=1 IMAGE=2
<input type="checkbox"/> BLADEBONE FRONT	<input type="checkbox"/> 101007601000100000	<input type="checkbox"/> NG <input type="radio"/> OK	<input type="checkbox"/> BLADEBONE SCAPULA-Y	<input type="checkbox"/> 101007601000470000	<input type="checkbox"/> NG <input type="radio"/> OK
<input type="checkbox"/> SHOULDER JOINT - FRONT	<input type="checkbox"/> 101007604000100000	<input type="checkbox"/> NG <input type="radio"/> OK	<input type="checkbox"/> SHOULDER JOINT - FRONT	<input type="checkbox"/> 101007604000100000	<input type="checkbox"/> NG <input type="radio"/> OK
VIEW ONE IMAGE ONLY			COMPLETE		

**FIG.19**



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**FIG 20**



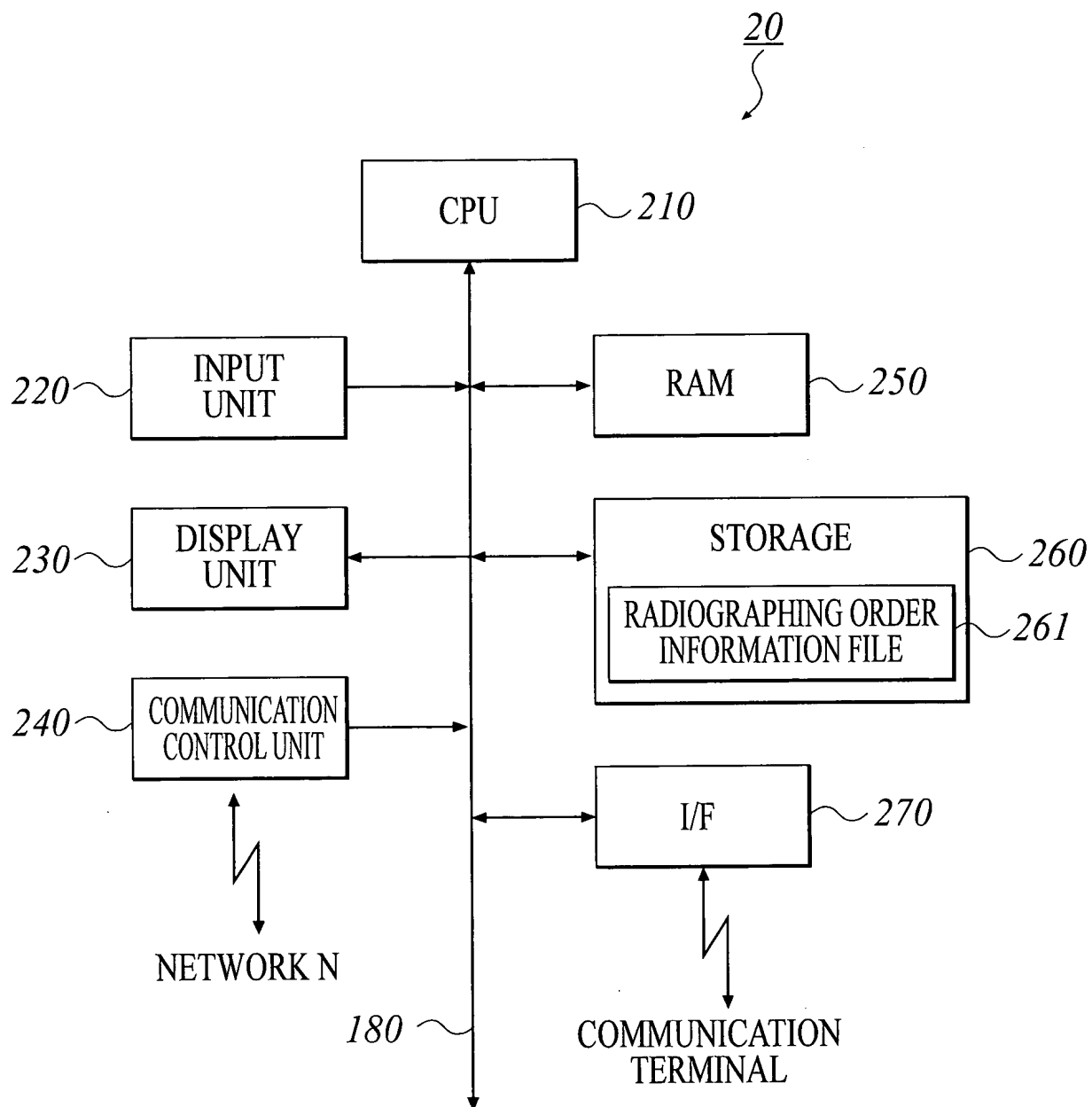
**FIG.21**

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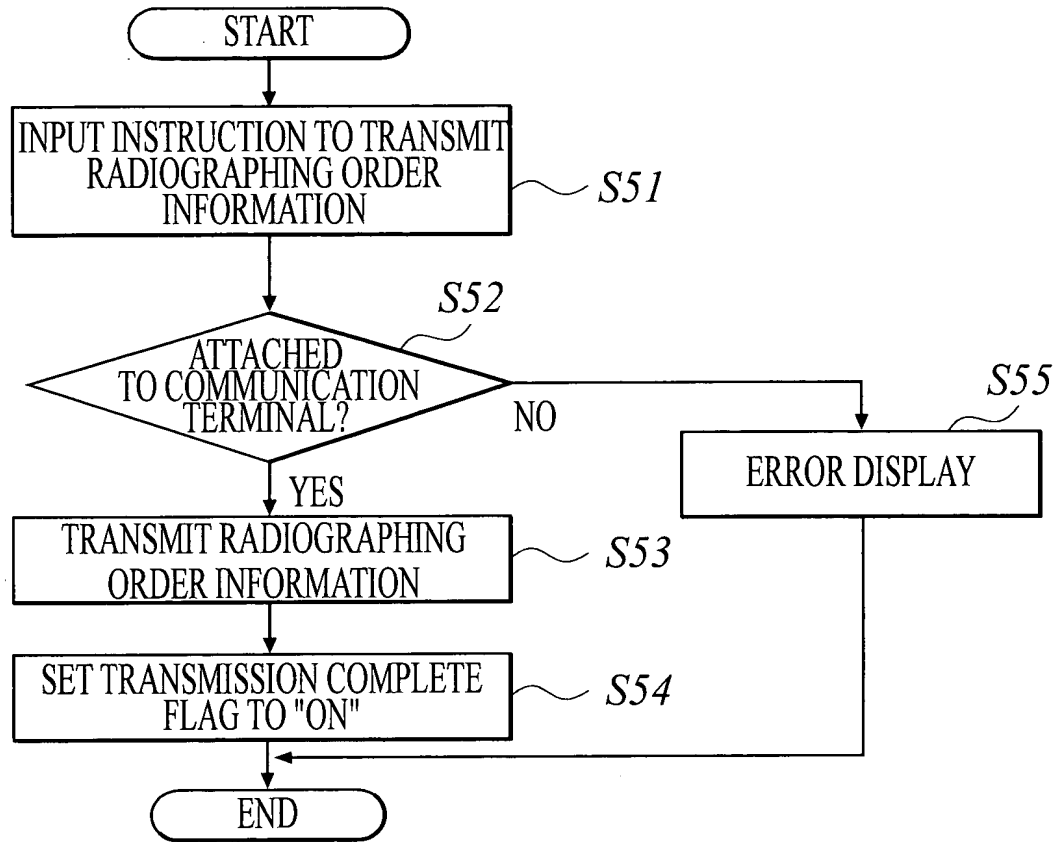
RADIOGRAPHING ID	PATIENT ID	NAME	SEX	AGE	HOSPITAL ROOM	DEPARTMENT OF REQUEST	RADIOGRAPHIC PART	
2002101001	1000002	○○○○	MALE	40	101	SURGERY	SKULL A → P	
2002101002	1000002	○○○○	MALE	40	101	SURGERY	CHEST R → L	
2002101003	1000005	△△△△	FEMALE	50	205	INTERNAL MEDICINE	ABDOMEN LAT	
2002101004	1000005	△△△△	FEMALE	50	205	INTERNAL MEDICINE	ABDOMEN P → A	
⋮	⋮	⋮	⋮	⋮	⋮	⋮	⋮	⋮

RADIOGRAPHING ID	RADIOGRAPHING APPARATUS	RADIOGRAPHING COUNT	CASSETTE ID
2002101001	A	3	
2002101002	A	4	
2002101003	B	5	
2002101004	B	5	
⋮	⋮	⋮	⋮

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**FIG.22**

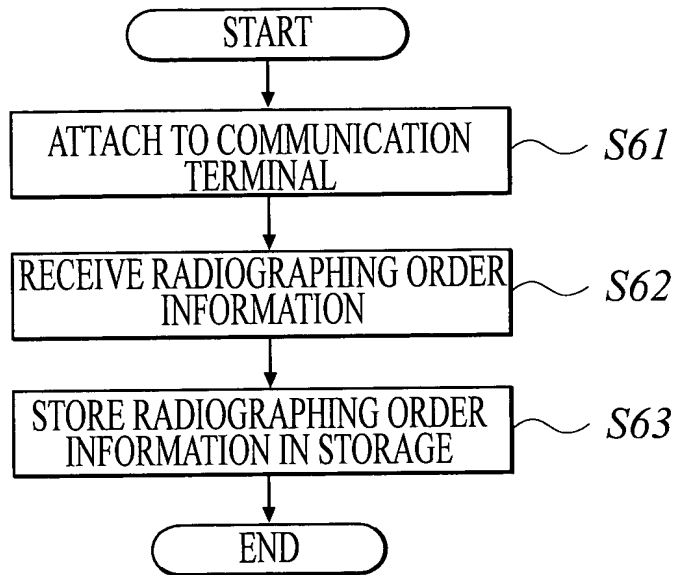


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**FIG. 23**



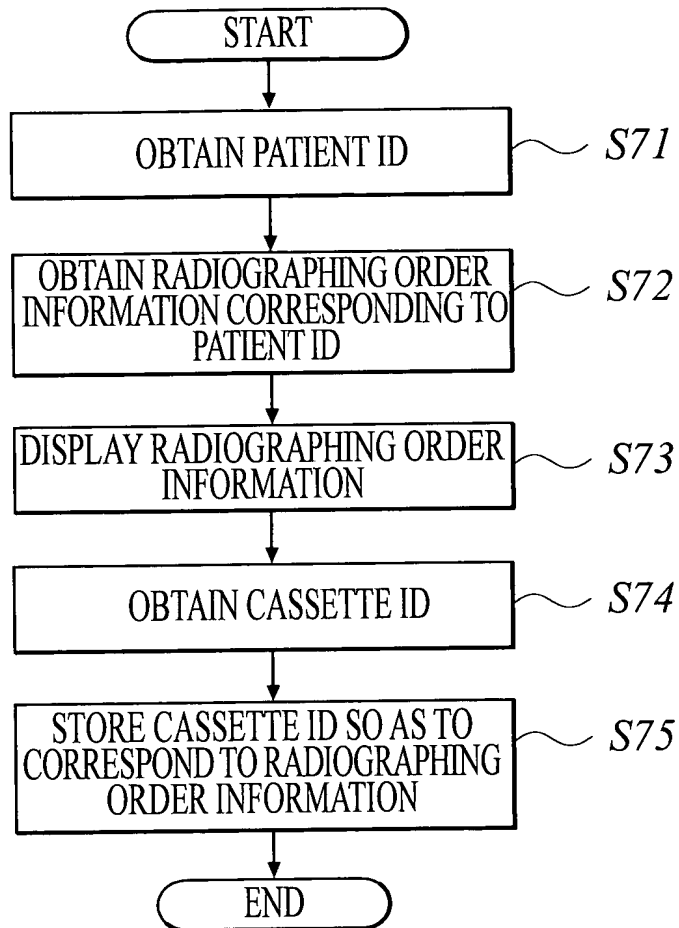


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**FIG 24**

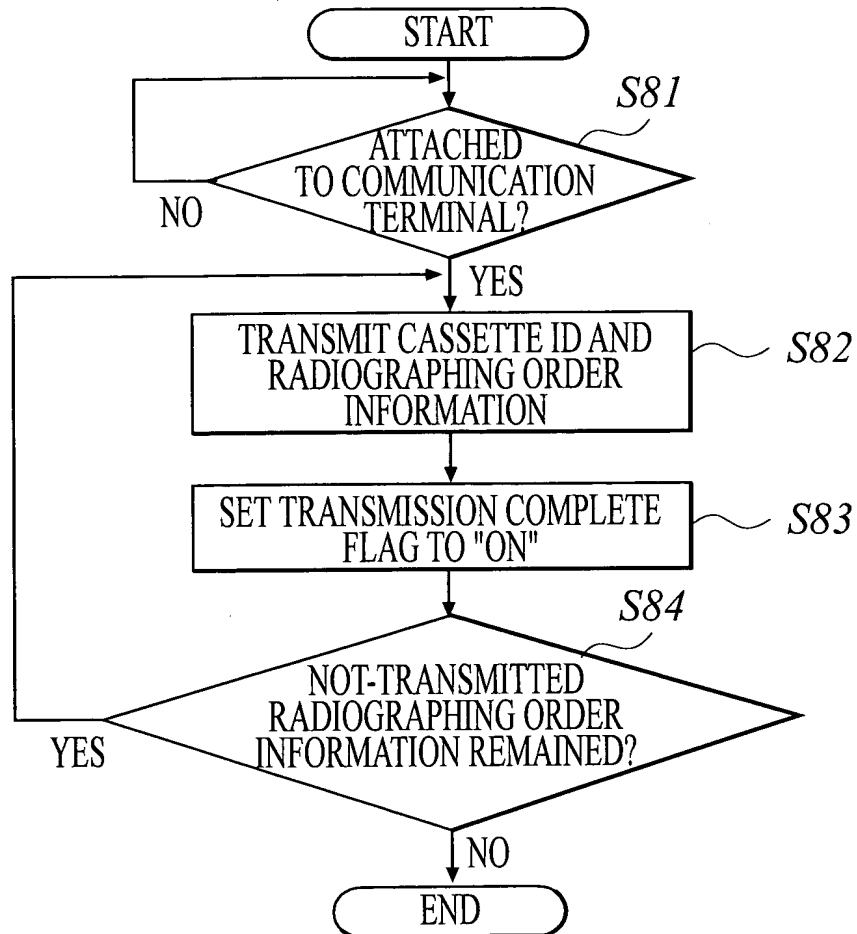


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# FIG 25



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**FIG. 26**



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**FIG 27**

